

Champlain Maternal Newborn Regional Program Programme régional des soins à la mère et au nouveau-né de Champlain

Champlain Maternal Newborn Regional Program

Network

Terms of Reference

Purpose

The Champlain Maternal Newborn Regional Program Network (the Network) provides leadership and functions in an advisory role to Health Service Providers (HSPs), Partners, key stakeholders and the LHIN, in order to improve the health of mothers and newborns.

The Leadership Team

The Champlain Maternal Newborn Regional Program Leadership Team (the Leadership Team) is comprised of the Regional Medical Lead – Obstetrics and Gynecology, the Regional Medical Lead – Newborn, and the Regional Director.

Accountability

The Network holds ethical, moral, and social responsibility to act in the best interest of the mothers, babies and their families within the Champlain region.

The Leadership Team is accountable to the Champlain LHIN for a set of deliverables agreed upon annually between the LHIN, the Leadership Team, and the Network. The Network will act as an advisory body to the LHIN and to the Leadership Team, supporting and furthering the vision, mission and goals of an integrated program for the Champlain region.

Roles and Responsibilities

- Provide direction and oversight to establish the Program, develop and implement the strategic plan in alignment with the LHIN, the Blueprint, and the Provincial Maternal, Child and Youth Health Strategy.
- Ensure the Network utilizes a collaborative shared planning model.
- Establish such committees and task forces needed on issues such as quality improvement and collaborative practice, human resource planning, educational programs and research projects.
- Integrate service delivery planning and support quality improvement initiatives that are evidence informed to improve the health of mothers and newborns.
- Ensure community engagement at the regional level, including the identification of clients' priorities, and opportunities to improve the maternal newborn experience.
- Ensure the maternal newborn health system is performing in a sustainable and accountable manner through regional health human resources planning, future program funding and performance target recommendations.
- Strive to eliminate inequities by identifying, understanding and addressing how the circumstances in which families live (social determinants of health) impact the maternal

newborn experience. Health equity will seek to put in place a program that increases access, participation and positive experience and outcome for all.

Membership

The Network brings together an interdisciplinary representation of Health Service Providers (HSPs), Partners, LHINs and other key stakeholders to serve as a Community of Practice Network for maternal and newborn care within Champlain. Composition of the Network will reflect a balance of skills and expertise needed for the Network to fulfill its roles and responsibilities. The membership will also reflect the scope of the Network which includes maternal and newborn care across rural, urban, community and tertiary settings within the diverse communities across the LHIN.

Process for Selection of Members

The Champlain LHIN will appoint the original members of the Network in consultation with the Leadership Team. Guidelines to assist in the selection process are described below.

Guidelines for the Selection of Members

Network members are selected based on the following skills and expertise:

- Clinical leadership in academic health science centres, community hospitals, and community settings.
- Administrative leadership in academic health science centres, community hospitals, and community settings.
- Expertise in maternal and newborn care.
- Expertise in health human resources, education, training, and planning.
- Familiarity with or knowledge of the Local Health Integration Networks and Ontario system of health care.
- Ability to provide linkages to groups and organizations in the system of maternal and newborn health care.
- Ability to advance a systems approach to care.
- An ability to act in the best interest of the Champlain LHIN and Ontario system of maternal and newborn health care as a whole.
- Ability to work and communicate effectively as a member of the Network, and with other members of the Network and the staff.
- Ability and willingness to commit the necessary time to participate on the Network.

Founding Network Membership*

- Regional Director
- Regional Medical Lead OB/GYN
- Regional Medical Lead Newborn
- Champlain LHIN representative
- South East LHIN representative
- Kingston General Hospital representative
- Community Health Centres representative
- Public Health Units representative
- Montfort representative
- Queensway Carleton Hospital representative
- Children's Hospital of Eastern Ontario representative
- The Ottawa Hospital representative

- Eastern counties HSP representative
- Western counties HSP representative
- Midwife representative
- Family Medicine representative
- Provincial Maternal Newborn Advisory Committee representative
- BORN Ontario representative
- French Language Health Services Network of Eastern Ontario representative
- Chair of the Department of Pediatrics, University of Ottawa
- Committee Chairs

* Additional members if not included above:

- Rotating francophone representative from a French-language designated organization
- University representative.

Terms of Office for Members

Initial terms for the Network members will be established for 2 and 3 years to allow for a staggered turnover of members. Membership is renewable by the Network upon completion of the term.

Role and Terms of Office: Chair

The Chair will be appointed by the Champlain LHIN in consultation with the Leadership Team.

The Chair will be responsible for leading Network meetings, preparing meeting agendas, reviewing minutes and facilitating their timely distribution, ensuring Network members remain active, engaged participants and representing the Champlain Maternal Newborn Regional Program.

The term of office for the Chair will be two years, with a staggered turnover between the Chair and Vice Chair positions. A two-year term may be extended, and if such is the case, it will be renewable annually not to exceed a total of 4 years with approval by the Champlain LHIN in consultation with the Leadership Team and the Network.

Role and Terms of Office: Vice Chair

The Vice Chair will be appointed by the Champlain LHIN in consultation with the Chair, the Leadership Team and the Network. The selection of the Vice Chair will take into account the Chair's representation focus and will complement this representation and not duplicate it to ensure diversity across the Chair and Vice Chair positions (e.g. if the Chair is from a tertiary/urban/teaching hospital, the Vice Chair may be from a community/rural, centre).

The Vice Chair is to serve in capacity of Chair when Chair is unavailable. The Vice Chair may put their name forward for the position of Chair, but will not automatically assume the position of Chair at the end of his/her term.

The term of office for the Vice Chair will be two years, with a staggered turnover between the Chair and Vice Chair positions. A two-year term may be extended, and if such is the case, it will be renewable annually not to exceed a total of 4 years with approval by the Champlain LHIN in consultation with the Leadership Team and the Network

Decision Making and Quorum

The Network will act in the best interest of the maternal and newborn health care system and all members share accountability for decisions and outcomes. Decisions will be based on the needs of mothers and newborns and on evidence whenever possible.

Network members are expected to participate in person or by electronic technology such as telephone and video conferencing. Designates are not permitted. Decisions are made by consensus of the Network. If consensus can't be reached, the Chair will call a vote of the Network members. An outcome of 50% plus 1 vote supports finalizing a decision.

In the event that the Network and the Leadership Team disagree, the issue will be taken to the LHIN for resolution. The LHIN will discuss the issue with the Leadership Team and the Network Chair and will deliver and communicate a decision to the Network and Leadership Team.

Frequency of Meetings

The Network meets quarterly, or more often on the call of the Chair.